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			U.S. PATENT DOCL	JMENTS	
	Cite No.1	U.S. Patent Document Kind Code ² Number (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	- 1	3,424,153	F.M. LEWIS	01-28-1969	
		4,665,562	Winer	05-19-1981	
		4.964, 176	Previdi	10-23-1990	
		5,031,247	Carter	07-16-1991	
		5,613,250	Be //	10-26-1997	
		5,970,525	Gallinot etal	01-16-2001	
		6,173,448	Krofowsky Schaub	03-27-2001	
		6,205,693	Dunn	12-11-2001	
 		6,327,710	Dan		
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				FOR	EIGN PATENT DOCUMENT	rs		
T		ı	oreign Patent Do	cument	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
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